



2011/2012 REGISTRATION

ADULT/TEEN SKATE



Skater's Name: \_\_\_\_\_ M F  
First Last Circle One

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home Phone #: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Health Card #: \_\_\_\_\_ optional  
Day Month Year

E-mail Address: \_\_\_\_\_

Name of Parents/Guardians: \_\_\_\_\_

Emergency Contact (other than parent): \_\_\_\_\_ Phone # \_\_\_\_\_

Any medical concerns?: \_\_\_\_\_

CSC Returning Member \_\_\_\_\_ Skate Canada # \_\_\_\_\_ Other Club \_\_\_\_\_ Skate Canada # \_\_\_\_\_

Any previous skating experience \_\_\_\_\_

<b>FEES</b>	Annual Fee (from column at left)	\$ _____
\$220	Skate Canada Membership Fee	\$ 32.00
	50/25/25 Tickets	\$ 50.00
	TOTAL OWING	\$ _____

*In order to keep registration fees low, we require every family to sell a book (\$50) of 50/25/25 tickets.*

**PAYMENT OPTIONS**

*Paid in Full* \_\_\_\_\_ Cash \_\_\_\_\_ Cheque \_\_\_\_\_

*Post Dated Cheques with a \$50 non-refundable deposit* \$50 Cash Cheque

_____	Post dated pmts:	_____	Sept. 15/11
Parent/Guardian		_____	Oct. 15/11
_____		_____	Nov. 15/11
CSC Executive		_____	Dec.15/11

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